



Belmont Permit Center

PERMIT APPLICATION

Application No.: _____

Case Type:

Zoning of Property: _____

- | | | |
|---|--|--|
| <input type="checkbox"/> Design Review | <input type="checkbox"/> Tentative Tract Map | <input type="checkbox"/> Certificate of Appropriateness |
| <input type="checkbox"/> Variance | <input type="checkbox"/> Façade Improvement Rebate | <input type="checkbox"/> General Plan Amendment |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Lot Line Adjustment | <input type="checkbox"/> Rezoning / Zoning Ordinance |
| <input type="checkbox"/> Floor Area Exception | <input type="checkbox"/> Grading Permit Approval | <input type="checkbox"/> Geologic Review |
| <input type="checkbox"/> City Code Exception | <input type="checkbox"/> Conceptual Development Plan | <input type="checkbox"/> Geo-Hazards Map Amendment |
| <input type="checkbox"/> Tentative Parcel Map | <input type="checkbox"/> Detailed Development Plan | <input type="checkbox"/> Subdivision Ordinance Exception |

Zoning Case Numbers:

(Staff Use Only)

Project Description: _____

Property Description:

Street Address: _____, Belmont, CA 94002

Assessors Parcel Number: _____

Property Area (sq. ft.): _____

Nearest Cross Street: _____

Applicant Information:

Owner Name: _____	Telephone Number: _____ ()	Fax Number: _____ ()
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Mailing Address, if different from Site Address: _____	E-mail Address: _____
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Applicant Name, if different from Property Owner: _____	Telephone Number: _____ ()	Fax Number: _____ ()
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Applicant Mailing Address: _____	E-mail Address: _____
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Submittal Authorization:

Signature of Owner: _____	Date: _____
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Signature of Applicant, if different from Owner: _____	Date: _____
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For Office Use Only: Fee Amount: _____ Check No.: _____



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Street Address: _____

Application No.: _____

Site Preparation / Grading:

Number of Cubic Yards of Combined Cut and Fill:

_____ Cubic Yards

OR Check ☐ if less than 50 Cubic Yards

Depth of any Cut or Fill at Deepest Point:

_____ Feet

OR Check ☐ if less than 2 Feet

Surface Area to be Graded or Cleared:

_____ Square Feet

OR Check ☐ if less than 2000 Square Feet

Retaining Walls:

The Project Includes New, Rebuilt or Extended Retaining Walls:

☐ Yes

☐ No

Maximum Height of New, Rebuilt or Extended Retaining Walls:

_____ Feet

Floor Area:

Existing Floor Area of All Enclosed Structures: _____ Square Feet

Proposed New Floor Area to be Added: _____ Square Feet

Total Floor Area Resulting from Project: _____ Square Feet

On-site Parking:

Existing Parking / Number of Spaces: _____ Covered _____ Uncovered

Proposed Additional or Lost Parking Spaces: _____ Covered _____ Uncovered

Total Parking Spaces Resulting from Project _____ Covered _____ Uncovered

Check any of the following items that apply to the project:

☐ Steep Terrain

☐ New Driveway / Curbscut

☐ New Signs

☐ Large Trees on Site

☐ New Water Service

☐ Redevelopment Area

☐ Historic Building on Site

☐ Construction Dumpster Required